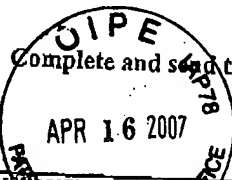


PART B - FEE(S) TRANSMITTAL



Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE
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7590

01/29/2007

Christopher M. Beck
Genzyme Corporation
153 Second Avenue
Waltham, MA 02451

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Joyce D. Lange (Depositor's name)
Joyce D. Lange (Signature)
April 16, 2007 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/686,808	10/16/2003	Steven K. Burke	438.1 US	8791

TITLE OF INVENTION: METHOD FOR PROMOTING BONE FORMATION

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE DUE	DATE
nonprovisional	NO	\$1400	\$300	\$0	\$1700	04/30/2007
EXAMINER	ART UNIT	CLASS-SUBCLASS				
SCHLIENTZ, LEAH H	1618	424-078120				

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).
☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list
(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
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1
2 Genzyme Corporation
3

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.111. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Genzyme Corporation

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Cambridge, MA US

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

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☐ Publication Fee (No small entity discount permitted)
☐ Advance Order - # of Copies 0

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☐ Payment by credit card. Form PTO-2038 is attached.
☒ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 07-1074 (enclose an extra copy of this form).

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☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

Typed or printed name Christopher M. Beck, PRD

Date April 16, 2007

Registration No. 52,603

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on April 16, 2007.

Date

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Joyce D. Lange

Typed or printed name of person signing Certificate

Registration Number if applicable

781-434-3572

Telephone Number

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Issue Fee - Application No. 10/686,808
(2 copies of Fee Transmittal)

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